Responsible Opioid Prescribing: A Physician's Guide

Model Policy for the Use of Controlled Substances for the Treatment of Pain

influencing its development and manifestations. It is characterized by behaviors that include the following: impaired control over drug use, craving, compulsive use, and continued use despite harm. Physical dependence and tolerance are normal physiological consequences of extended opioid therapy for pain and are not the same as addiction.

Chronic Pain—Chronic pain is a state in which pain persists beyond the usual course of an acute disease or healing of an injury, or that may or may not be associated with an acute or chronic pathologic process that causes continuous or intermittent pain over months or years.

Pain—An unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage.

Physical Dependence—Physical dependence is a state of adaptation that is manifested by drug class-specific signs and symptoms that can be produced by abrupt cessation, rapid dose reduction, decreasing blood level of the drug, and/or administration of an antagonist. Physical dependence, by itself, does not equate with addiction.

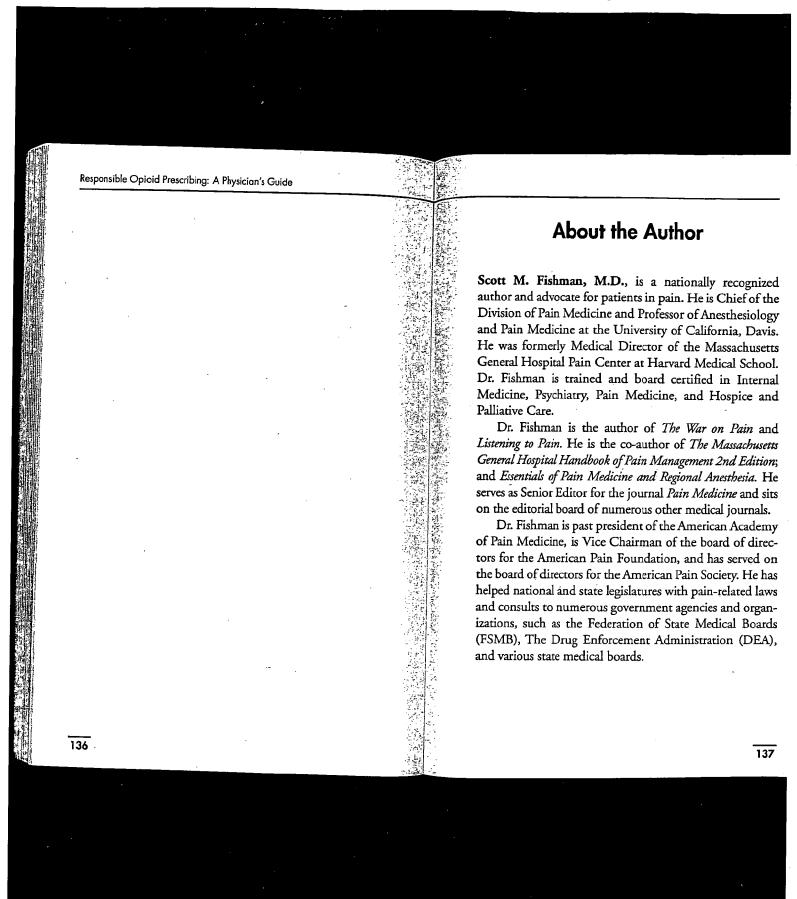
Pseudoaddiction—The iatrogenic syndrome resulting from the misinterpretation of relief seeking behaviors as though they are drug-seeking behaviors that are commonly seen with addiction. The relief seeking behaviors resolve upon institution of effective analgesic therapy.

Substance Abuse—Substance abuse is the use of any substance(s) for non-therapeutic purposes or use of medication for purposes other than those for which it is prescribed.

Tolerance—Tolerance is a physiologic state resulting from regular use of a drug in which an increased dosage is needed to produce a specific effect, or a reduced effect is observed with a constant dose over time. Tolerance may or may not be evident during opioid treatment and does not equate with addiction.

135

134



Confidential END00051442

\$12.95

Responsible Opioid Prescribing offers physicians effective strategies for reducing the risk of addiction, abuse, and diversion of opioids that they prescribe for their patients in pain. Written by pain medicine specialist Scott M. Fishman, M.D., this concise handbook translates the Federation of State Medical Board's Model Policy for the Use of Controlled Substances for the Treatment of Pain into pragmatic steps for risk reduction and improved patient care, including:

- Patient evaluation, including risk assessment
- Treatment plans that incorporate functional goals
- Informed consent and prescribing agreements
- Periodic review and monitoring of patients
- Referral and patient management
- Documentation
- Compliance with state and federal law

Scott M. Fishman, M.D., is a leading pain medicine clinician, researcher, teacher, lecturer, and writer. He is Chief of the Division of Pain Medicine and Professor of Anesthesiology at the University of California, Davis. Board certified in Internal Medicine, Psychiatry, Hospice and Palliative Medicine, and Pain Medicine, Dr. Fishman is Past President of the American Academy of Pain Medicine, author of The War on Pain and Listening to Pain, and coauthor of The Massachusetts General Hospital Handbook of Pain Management and Essentials of Pain Medicine.



Confidential END00051443